Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

Applicant Name: LINDA DICENS		
Date Received: 0/22/2013 Applicant Number: 10377		
Recommended Applicant Pool Status: Final Applicant Pool Status:		
☑Included ☐Removed	Included Removed	
REQUIREMENTS:		
Was the application received before the subn	nission deadline?	
If NO, list time/date application was receiv	ed:	
2. Is the application complete?	✓Yes □No	
If NO, list the item(s) that need to be comp	letea:	
3. Indicate how the applicant responded to the following questions:		
A. Student enrolled in a college/university in		
If YES, consider I and ii only; If NO, conside	r I, ii, iii, and iv:	
i. Reside in the City of Austin?	ĽYes ∐No ́	
ii. Registered to vote in the City of A	Austin?	
iii. Continuously registered to vote in		
iv. Voted in 3 of the last 5 City of Au	stin general elections?	
❖ Follow-up needed related to REQUIREMENTS	? □Yes ☑No	
If YES, identify issue(s) addressed and disposition:		

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CONFLICTS OF INTEREST:

4. Did the applicant respond "Yes" to any conflict of interest questions? If YES, indicate which question(s):	PYes ☑No
Follow-up needed related to CONFLICTS OF INTEREST? If YES, identify issue(s) addressed and disposition:	□Yes ☑No
CONSISTENCY: 5. Are applicant answers consistent? If NO, indicate which answer(s):	□Yes ☑No
Follow-up needed related to CONSISTENCY? If YES, identify issue(s) addressed and disposition: Expressed Houbts about which elections for she woken	□Yes □No
Quality Control Review By: QC Review	w Date: 2/25/28/3 2/28/13